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Form PTO-1594 (25-03 RECC 3. DEPARTMENT OF COMMERCE	
OMB No. 0651-0027 (exp. 6/30/2005)	U.S. Patent and Trademark Office
Tab settings ⇔⇔⇔ ▼ ▼ 10	2534624 • • • • • • • • • • • • • • • • • • •
To the Honorable Commissioner of Patents and Trademarks:	2534624 elease record the attached original documents or copy thereof.
Name of conveying party(ies):	2. Name and address of receiving party(ies)
TELCOR Clinical Solutions, Inc.	Name:TELCOR Inc Internal Address:
Individual(s) Association	Street Address: 1560 So. 70th St.
General Partnership Limited Partnership	
Corporation-State	City: Lincoln State: NE Zip: 68506
Other Limited Liability Company	
Additional name(s) of conveying party(ies) attached?	Association
	General Partnership
3. Nature of conveyance:	Limited Partnership
Assignment Merger	Corporation-State Nebraska
Security Agreement	Other If assignee is not domiciled in the United States, a domestic
CtherExecution Date: 12-30-02	representative designation is attached: 🚅 Yes 💂 No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? 💂 Yes 💂 No
4. Application number(s) or registration number(s):	
A. Trademark Application No.(s) Serial No. 78/038672	B. Trademark Registration No.(s)
Seriar No. 70,030072	
Additional number(s) at	
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name: James C. Zalewski	
Internal Address:	7. Total fee (37 CFR 3.41)\$0
	☐ Enclosed
	Authorized to be charged to deposit account
Street Address: 134 So. 13th St.	8. Deposit account number:
Suite 800	
City: Lincoln State: NE Zip: 68508	, , , , , , , , , , , , , , , , , , , ,
9. Statement and signature.	THIS SPACE
To the best of my knowledge and belief, the foregoing inform copy of the original document.	nation is true and correct and any attached copy is a true
James C. Zalewski	8-18-03
Name of Person Signing Si	ignature Date

Mail documents to be recorded with required cover sheet information to:

Commissioner of Patent & Trademarks, Box Assignments

Washington, D.C. 20231

TRADEMARK
REEL: 002810 FRAME: 0270

Tab settings	Please record the attached original documents or copy thereof
Name of conveying party(ies):	Name and address of receiving party(ies)
TELCOR Clinical Solutions, Inc.	Name: TELCOR Inc Internal Address:
☐ Individual(s) ☐ Association ☐ General Partnership ☐ Limited Partnership ☐ Corporation-State ☐ Other _ Limited Liability Company Additional name(s) of conveying party(ies) attached? ☐ Yes ☐ No 3. Nature of conveyance: ☐ Assignment ☐ Merger ☐ Security Agreement ☐ Change of Name ☐ Other Execution Date:	Street Address: 1560 So. 70th St. City: Lincoln State: NE Zip: 6850 Individual(s) citizenship Association General Partnership Limited Partnership Corporation-State Nebraska Other If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No (Designations must be a separate document from assignment)
4. Application number(s) or registration number(s):	Additional name(s) & address(es) attached?
A. Trademark Application No.(s) Serial No. 78/038672 Additional number(s) att	B. Trademark Registration No.(s) tached □ Yes □ No
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name:James_CZalewski Internal Address:	7. Total fee (37 CFR 3.41)\$ 40.00 Enclosed Authorized to be charged to deposit account
Street Address: 134 So. 13th St., Suite 800	8. Deposit account number:
City: Lincoln State: NE Zip: 68508	(Attach duplicate copy of this page if paying by deposit accou
9. Statement and signature. To the best of my knowledge and belief, the foregoing inform copy of the original document.	
	ignature Date per sheet, attachments, and document:

TRADEMARK REEL: 002810 FRAME: 0271

UNANIMOUS WRITTEN CONSENT TO DISSOLVE

TELCOR Clinical Solutions LLC

The undersigned hereby unanimously consent to the dissolution of TELCOR Clinical Solutions LLC. A Statement of Intent to Dissolve shall be filed with the Secretary of State of Nebraska.

Upon dissolution the accounts shall be settled. The liabilities of the company shall be paid and the remaining assets shall be assigned in the following order:

- Creditors shall be paid in the order of priority as provided by law, except to members
 of the Company on account of their contributions to capital.
- 2. All intellectual property rights shall be and hereby are assigned to TELCOR Inc.
- 3. The members of the Company shall be paid the remaining assets pro rata in accordance with their respective membership interests.

TELCOR Clinical Solutions LLC is hereby dissolved on this 30th day of December, 2002.

James A. Terrano

Deborah K. Larson

Kebekah J. Clarke

Nicholas J. Terrano

Christian A. Terrano

Mark A. Cederdahl

RECORDED: 02/28/2003

REEL: 002810 FRAME: 0272